FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZ	ZATION		
1 Ortivi 1	(See instruc	tions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
CITIZENS TO	ELECT PHIL ROE TO CONGRE	ss 	11111	
ADDRESS (number and	PO BOX 3218			
(Check if address is changed)	,			
	JOHNSON CITY		L _I N L	37602 -
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	;			
(Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE M 0 4	03 / 909			
3. FEC IDENTIFICA	TION NUMBER	C C00444471		
4. IS THIS STATEM	NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my k	nowledge and belief it is true, correct	t and complete	
Type or Print Name of	Treasurer Mr. GERALD D). THOMAS		
Signature of Treasurer	Electronically Filed by Mr. GEF	RALD D. THOMAS	Date 04	20 / 20 O
NOTE: Submission of fa	lse, erroneous, or incomplete information n	nay subject the person signing this S	•	_
Office Use Only		For further information Federal Election Communication Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)